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Description automatically generated **ARCHAEOLOGIST CERTIFICATION**

**APPLICATION FORM**

THIS IS AN AUDITABLE DOCUMENT

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Section 1** | | | | | | | | | | | | | |
| **Applicant Name** (*first name surname*)**:** | | | |  | | | | | | | | | |
| **Consulting Company Affiliation:** | | | |  | | | | | | | | | |
| **Phone and Email Address** | | | |  | | | | | | | | | |
| **Applying for:** | | | | Certified Archaeologist  ☐ Certified Field Director | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_  Applicant’s signature Date | | | | |
| **Culture Area(s) applied for:** | | | | Subarctic-Boreal Forest  Interior Plateau  ☐ Northwest Coast | | | | |
| **1)** Applicant is an existing Archaeology Branch approved Field Director for culture area specified above (complete Section 2)  **2)** Applicant has previously held or currently holds HCA permit(s) for the culture area specified above (complete Section 2)  *Or*  **3)** Applicant has not been approved as a Field Director for culture area specified above (complete Section 3)  **4)** Applicant has not previously held an HCA permit for the culture area specified above (complete Section 3) | | | | | | | | | | | | | |
| **Section 2** | | | | | | | | | | | | | |
| **Applicants previously approved by the Archaeology Branch** (if options 1 or 2 above are selected in Section 1) | | | | | | | | | | | | | |
| **1) Required supporting documents**  to be included with submission email: | | | | | | | | Updated Curriculum Vitae (*if one has not been submitted in the last 5 years)* | | | | | |
| **2) Permits held by the applicant, or where applicant has been previously accepted as a Field Director** (add more rows if needed) | | | | | | | | | | | | | |
| **Permit #** | | | **Permit Holder or Field Director** | | | | | **Culture Area** | | | | **Final Permit Closed** | |
|  | | | Choose an item. | | | | | Choose an item. | | | | Choose an item. | |
|  | | | Choose an item. | | | | | Choose an item. | | | | Choose an item. | |
|  | | | Choose an item. | | | | | Choose an item. | | | | Choose an item. | |
| **3) To the applicant’s knowledge, are there:**  **a) Current restrictions to the applicant’s existing Field Directorship(s), *and/or***  **b) Current restrictions to the applicant holding and/or applying for a permit to the Archaeology Branch, and/or**  **c) Recent concerns about applicant’s assessment work and/or permit compliance expressed by the Archaeology Branch.** | | | | | | | | | | | | | |
| ☐ No restrictions or concerns, or  ☐ Restrictions and/or  Concerns, *describe restrictions/concerns below*: | | | | | | | | | | | | | |
| **Section 3** | | | | | | | | | | | | | |
| **New Applicants**(if options 3 or 4 above are selected in Section 1) *Requirements are consistent with Archaeology Branch Bulletin 17* | | | | | | | | | | | | | |
| **1) Required supporting documents**  to be included with submission email: | | | | | | | Curriculum Vitae  Experience Summary for Field Director applications spreadsheet in Excel format | | | | | | |
| **2) Report examples** - Senior authorship with positive results & management recommendations (add more rows if needed) | | | | | | | | | | | | | |
| **Permit #** | | **Interim or Final Report** | | | **Report name** (include BCER number if applicable) | | | | | **Regulator** | | | **Approved** |
|  | | Choose an item. | | |  | | | | | Choose an item. | | | Choose an item. |
|  | | Choose an item. | | |  | | | | | Choose an item. | | | Choose an item. |
|  | | Choose an item. | | |  | | | | | Choose an item. | | | Choose an item. |
| **3) Authored Site Form examples** (add more rows if needed) | | | | | | | | | | | | | |
| **Permit #** | | **Borden Number** | | | **Site Type** | | | | | **Accepted by Inventory** | | | |
|  | |  | | |  | | | | | Choose an item. | | | |
|  | |  | | |  | | | | | Choose an item. | | | |
| **4) References** | | | | | | | | | | | | | |
|  | **First name, surname, & title** | | | | | **Email:** | | | | | **Phone number:** | | |
| a) |  | | | | |  | | | | |  | | |
| b) |  | | | | |  | | | | |  | | |
| c) |  | | | | |  | | | | |  | | |

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| --- | --- | --- |
| **5) Total Days of Experience** (add additional Culture Areas by coping and pasting the entire section of table below)  *Information must be consistent with information presented in the Experience Summary for Field Director spreadsheet* | | **# of Days:** |
| Culture Area:  Choose an item. | Assistant (HIP) |  |
| Supervisor (HIP) |  |
| Assistant s12.4 Alteration Permit |  |
| Supervisor s12.4 Alteration Permit |  |
| In Support on Permitted Activities (*ex. report writing, research, professional development*) |  |
| Non-permitted field assessment (*ex. PFR*) |  |
| Non-permitted desktop assessment (*ex. AOA*) |  |
| Total days for Culture Area: |  |